

Massachusetts All-Payer Claims Database: Quality Assurance (QA) Profile Reports

June 26, 2012



DIVISION OF
Health Care
Finance and Policy

Objectives for today's meeting

- Welcome and Introductions
- APCD Data Release
 - Update
 - Masking of Data Elements
- **NEW Quality Assurance (QA) Profile Reports**
- Open Discussion

Preliminary Data Release

- Data Release Administrative Bulletin
- Application Release
- Data Release Committee

Why masked values and their uses

ME037	Health Care Home Tax ID Number	Masked
ME038	Health Care Home National Provider ID	Masked
ME039	Health Care Home Name	Masked
ME077	Members SIC Code	Masked
ME001 / ME036	Health Care Home Number	Masked
ME001 / ME040	Product ID Number	Masked
ME001 / ME107	Payer / CarrierSpecificUniqueMemberID	Masked
ME001 / ME117	Payer / CarrierSpecificUniqueSubscriberID	Masked
MC026	National Service Provider ID	Masked
MC077	National Billing Provider ID	Masked
MC001 / MC024	Payer / Service Provider Number	Masked
MC001 / MC032	Payer / Service Provider Specialty	Masked
MC001 / MC076	Payer / Billing Provider Number	Masked
MC001 / MC079	Payer / Product ID Number	Masked
MC001 / MC100	Payer / Delegated Benefit Administrator Organization ID	Masked
MC001 / MC112	Payer / Referring Provider ID	Masked
MC001 / MC125	Payer / Attending Provider	Masked
MC001 / MC132	Payer / Service Class	Masked
MC001 / MC134	Payer / Plan Rendering Provider Identifier	Masked
MC001 / MC135	Payer / Provider Location	Masked
MC001 / MC137	Payer / CarrierSpecificUniqueMemberID	Masked
MC001 / MC141	Payer / CarrierSpecificUniqueSubscriberID	Masked

← Used to hide uncertain values

← Values used to link between files

Announcement of QA Profile Reports

- In an effort to obtain the best possible data available, the Division has implemented a data quality assurance framework for standardization, examination, correction, and monitoring of the data.
- The Division currently engages in multiple activities to measure and improve the quality of the data: verification reports, monthly work group meetings
- Recently, the Division contracted with JEN Associates, Inc. of Cambridge, MA to design, develop and implement additional quality assurance reports and is happy to announce the first phase of reports!

What's in the QA Profile Reports?

- The QA Profile Reports contain the following metrics:
 - Monthly counts of records submitted to APCD by file type
 - Mean, Median, Mode, Variance, Standard Deviation, Minimum, Maximum, and Quantiles for all numeric data elements
 - Frequency of values for character data elements
 - Time analysis of submitted records and unique member IDs over time

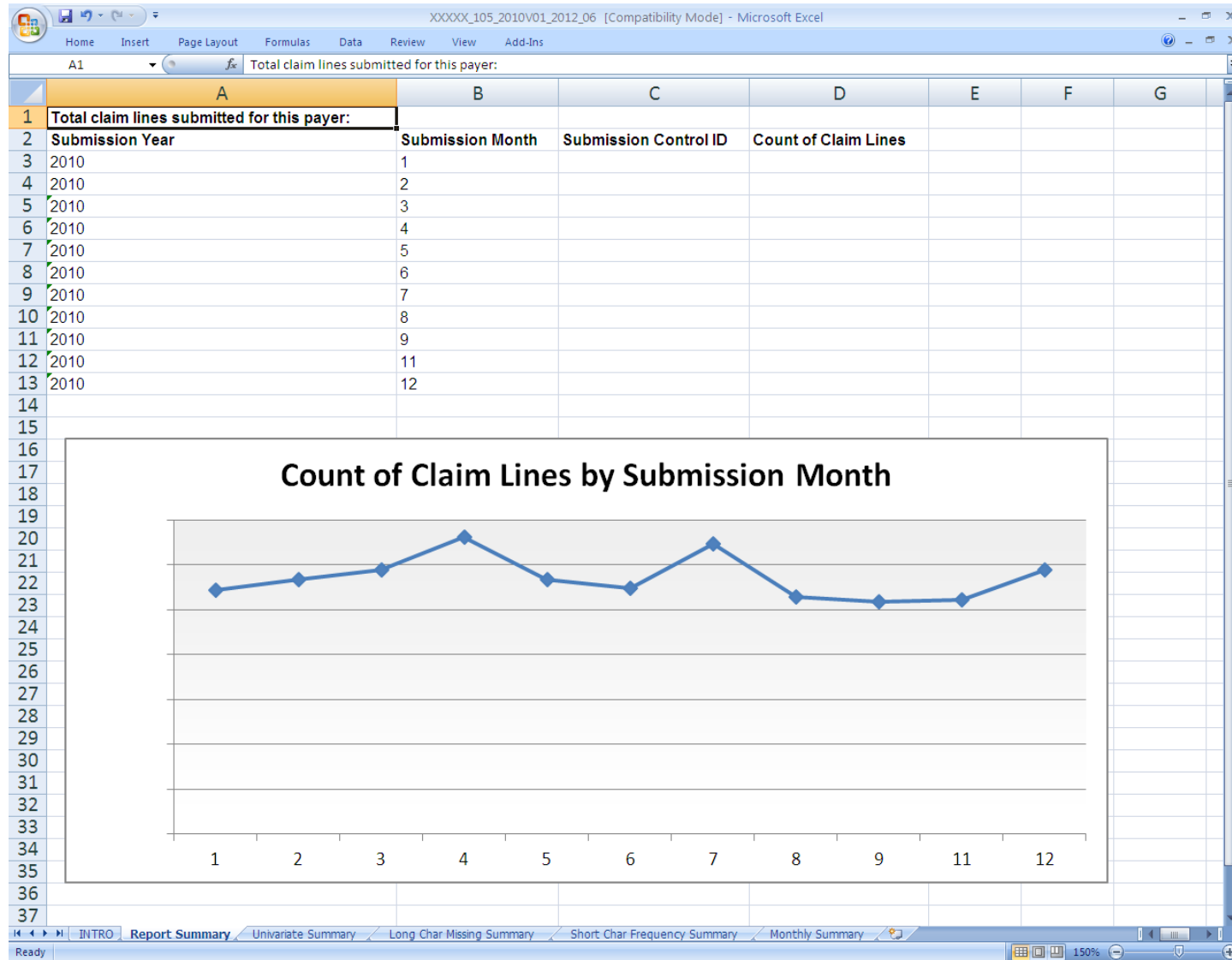
Who has Access to the Reports?

- Each carrier has access to reports based on their submitted data
- Authorized DHCFP staff are actively reviewing ALL reports
- DHCFP plans to publish aggregate, de-identified data for interested stakeholders

Which Reports Are Currently Available?

- The QA Profile Reports for Medical Claim, Pharmacy Claim, Dental Claim and Member Eligibility are currently available based on 2010 data.
- The QA Profile Reports include claim data submitted for the twelve months in 2010 and member eligibility data submitted for December 2010.
- The Division is reviewing reports for other years prior to release
- The reports are EXCEL workbooks with multiple sheets

Sample Report Summary Tab for Medical Claims



Sample Univariate Summary Tab for Medical Claims

XXXXX_105_2010V01_2012_06 [Compatibility Mode] - Microsoft Excel

HomeInsertPage LayoutFormulasDataReviewViewAdd-Ins

A1Variable

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE
	Variable	Number of Records With Values	Quantile 100%	Quantile 99%	Quantile 95%	Quantile 90%	Quantile 75%	Quantile 50%	Quantile 25%	Quantile 10%	Quantile 5%	Quantile 1%	Quantile 0%	Mean	Std Deviation	Median	Variance	Mode	Range	5th Highest Value	4th Highest Value	3rd Highest Value	2nd Highest Value	Highest Value	Lowest Value	2nd Lowest Value	3rd Lowest Value	4th Lowest Value	5th Lowest Value	Number of Records with Missing Value	Records with Missing Value
1	MedicalClaimID																														
2	OrgID																														
3	SubmissionControlID																														
4	SubmissionYear																														
5	SubmissionMonth																														
6	LineCounter																														
7	VersionNumber																														
8	MemberDateofBirthYear																														
9	MemberDateofBirthMonth																														
10	MemberAge		125	93	87	82	71	54	36	17	8	0	0	52	24	54	562	63	125	111	111	111	111	125	0	0	0	0	0		
11	DateServiceApprovedAPDateYear																														7%
12	DateServiceApprovedAPDateMonth																														7%
13	AdmissionDateYear																														61%
14	AdmissionDateMonth																														61%
15	DateofServiceFromYear																														
16	DateofServiceFromMonth																														
17	DateofServiceToYear																														
18	DateofServiceToMonth																														
19	Quantity																														
20	ChargeAmount																														
21	PaidAmount																														
22	PrepaidAmount																														
23	CopayAmount																														
24	CoinuranceAmount																														
25	DeductibleAmount																														
26	DischargeDateYear																														60%
27	DischargeDateMonth																														60%
28	PaidDateYear																														
29	PaidDateMonth																														
30	CoveredDays																														
31	NonCoveredDays																														
32	CoordinationOfBenefitsTPLLiabili																														
33	OtherInsurancePaidAmount																														
34	MedicarePaidAmount																														
35	AllowedAmount																														
36	NonCoveredAmount																														
37	ExcludedExpenses																														
38	WithholdAmount																														
39	LineNumber																														
40	QAETLControlID																														
41	Days from End of Service to Payment																														
42	Days from Beginning of Service to End of Service																														
43																															
44																															

Sample Long Char/Missing Summary Tab for Medical Claims

XXXXX_105_2010V01_2012_06 [Compatibility Mode] - Microsoft Excel

Variable						
Variable	Number of Records with Missing Values	Number of Records with Non-Missing Values	% Records with Missing Values	% Records with Non-Missing Values		
1 Payer			0%	100%		
2 NationalPlanID			100%	0%		
3 PayerClaimControlNumber			0%	100%		
4 InsuredGrouporPolicyNumber			0%	100%		
5 SubscriberSSN			0%	100%		
6 PlanSpecificContractNumber			0%	100%		
7 MemberSuffixorSequenceNumber			0%	100%		
8 MemberSSN			0%	100%		
9 MemberDateofBirth			0%	100%		
10 MemberCityName			0%	100%		
11 MemberZIPCode			0%	100%		
12 ServiceProviderNumber			0%	100%		
13 ServiceProviderTaxIDNumber			0%	100%		
14 NationalServiceProviderID			3%	97%		
15 ServiceProviderFirstName			47%	53%		
16 ServiceProviderMiddleName			57%	43%		
17 ServiceProviderLastNameorOrganiz			0%	100%		
18 ServiceProviderSuffix			33%	67%		
19 ServiceProviderSpecialty			2%	98%		
20 ServiceProviderCityName			0%	100%		
21 ServiceProviderZIPCode			0%	100%		
22 AdmittingDiagnosis			81%	19%		
23 ECode			99%	1%		
24 PrincipalDiagnosis			0%	100%		
25 OtherDiagnosis1			45%	55%		
26 OtherDiagnosis2			74%	26%		
27 OtherDiagnosis3			84%	16%		
28 OtherDiagnosis4			92%	8%		
29 OtherDiagnosis5			94%	6%		
30 OtherDiagnosis6			96%	4%		
31 OtherDiagnosis7			97%	3%		
32 OtherDiagnosis8			98%	2%		
33 OtherDiagnosis9			99%	1%		
34 OtherDiagnosis10			99%	1%		
35 OtherDiagnosis11			99%	1%		
36 OtherDiagnosis12			99%	1%		
37 RevenueCode			62%	38%		
38 ProcedureCode			6%	94%		
39 ICD9CMPProcedureCode			87%	13%		
40 PatientControlNumber			1%	99%		
41 ServiceProviderCountryCode			0%	100%		
42 DRG			97%	3%		
43 DrugCode			100%	0%		
44 BillingProviderNumber			0%	100%		
45 NationalBillingProviderID			2%	98%		
46 BillingProviderLastNameorOrganiz			0%	100%		
47 ProductIDNumber			0%	100%		
48 ReasonForAdjustment			41%	59%		
49 MemberStreetAddress			0%	100%		
50 LOINCCode			100%	0%		
51 DelegatedBenefitAdminist			100%	0%		

Ready

INTRO Report Summary Univariate Summary **Long Char Missing Summary** Short Char Frequency Summary Monthly Summary

Sample Short Char Frequency Summary Tab for Medical Claims

XXXXX_105_2010V01_2012_06 [Compatibility Mode] - Microsoft Excel

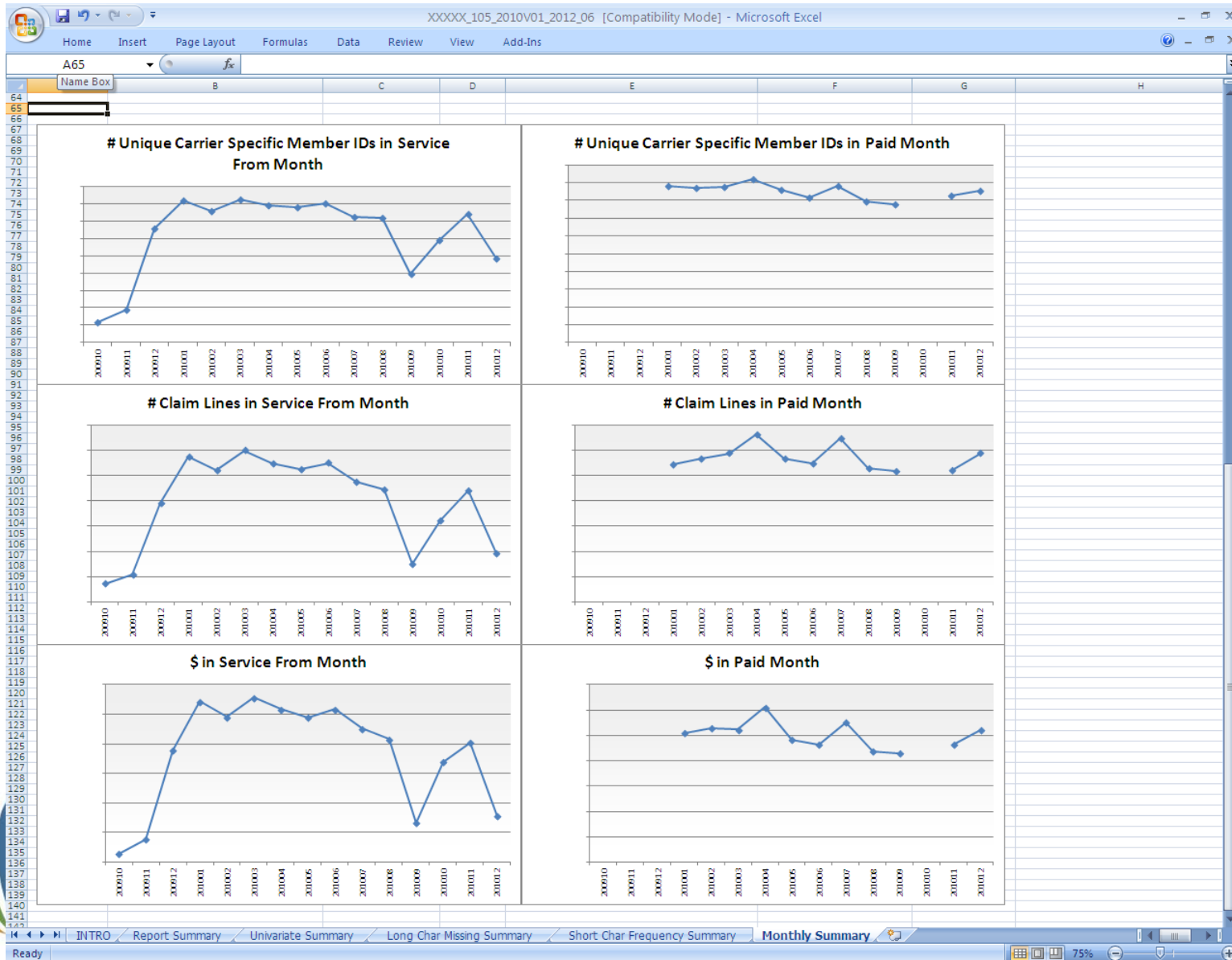
	A	B	C	D	E	F	G	H
1	Variable	Value	Frequency	Percent	CumFrequency	CumPercent		
14	MemberGender	Number_of_Levels	2					
15	MemberGender	F		59%		59%		
16	MemberGender	M		41%		100%		
17	MemberStateorProvince	Number_of_Levels	1					
18	MemberStateorProvince	MA		100%		100%		
19	AdmissionHour	Number_of_Levels	25					
20	AdmissionHour			88%		88%		
21	AdmissionHour	0000		2%		90%		
22	AdmissionHour	1200		1%		92%		
23	AdmissionHour	1000		1%		92%		
24	AdmissionHour	0900		1%		93%		
25	AdmissionHour	1100		1%		94%		
26	AdmissionHour	0800		1%		95%		
27	AdmissionHour	1400		1%		96%		
28	AdmissionHour	1300		1%		96%		
29	AdmissionHour	1500		1%		97%		
30	AdmissionHour	1600		1%		97%		
31	AdmissionHour	0700		0%		98%		
32	AdmissionHour	1700		0%		98%		
33	AdmissionHour	1800		0%		98%		
34	AdmissionHour	0600		0%		99%		
35	AdmissionHour	1900		0%		99%		
36	AdmissionHour	2000		0%		99%		
37	AdmissionHour	2100		0%		99%		
38	AdmissionHour	2200		0%		99%		
39	AdmissionHour	0500		0%		100%		
40	AdmissionHour	2300		0%		100%		
41	AdmissionHour	0100		0%		100%		
42	AdmissionHour	0200		0%		100%		
43	AdmissionHour	0300		0%		100%		
44	AdmissionHour	0400		0%		100%		
45	AdmissionTime	Number_of_Levels	7					

Ready

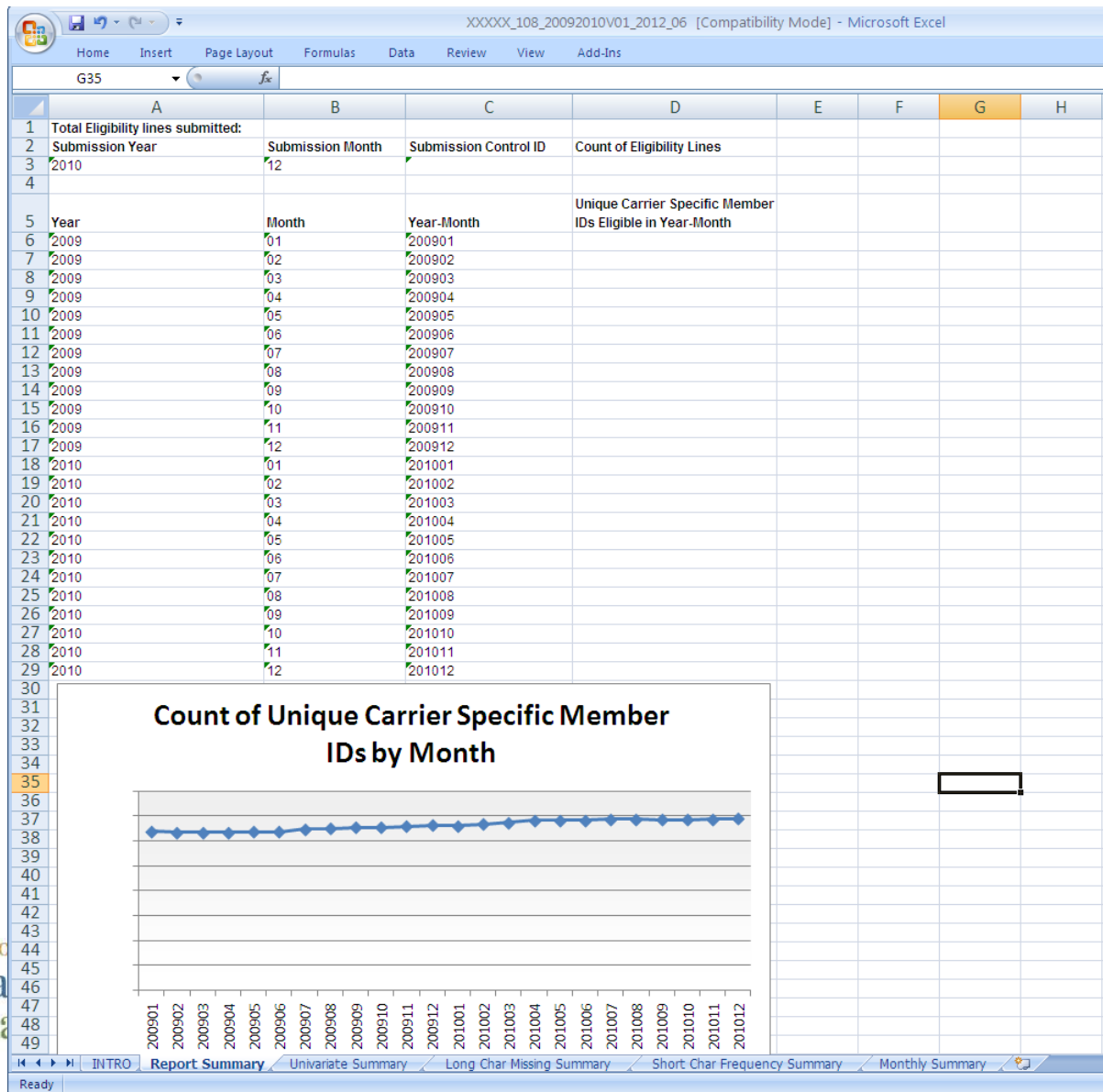
INTRO Report Summary Univariate Summary Long Char Missing Summary Short Char Frequency Summary Monthly Summary

175%

Sample Monthly Summary Tab for Medical Claims

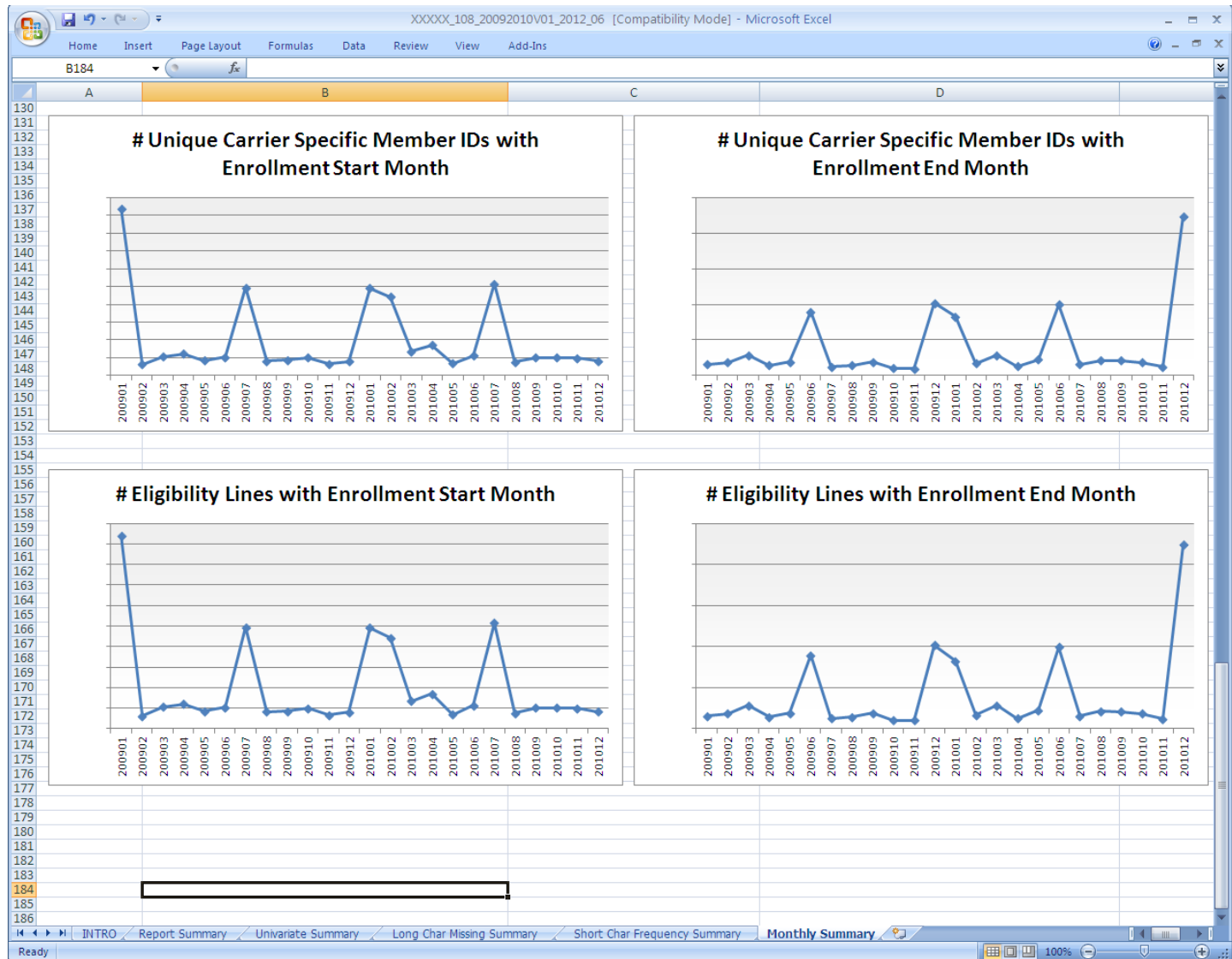


Sample Report Summary Tab for Eligibility Data



DIVISION
Health
Financial
Services

Sample Monthly Summary Tab for Eligibility Data



Industry Summary Report: 2010 Medical Claims

(Sorted by Payer ID)

MA_APCD_Medical_2010_Payers_Summary [Compatibility Mode] - Microsoft Excel			
Home Insert Page Layout Formulas Data Review View Add-Ins			
B1 Variable			
A	B	C	D
Payer	Variable	Problem	Worksheet
XXXXX	APC	Missing Values in 100% of Records	Alphanumeric Summary
XXXXX	APCVersion	Missing Values in 100% of Records	Alphanumeric Summary
XXXXX	AdmittingDiagnosis	Missing Values in 96% of Records	Long Char Missing Summary
XXXXX	AttendingProvider	Missing Values in 100% of Records	Long Char Missing Summary
XXXXX	CoveredDays	Missing Values in 100% of Records	Univariate Summary
XXXXX	DRGLevel	Missing Values in 100% of Records	Alphanumeric Summary
XXXXX	DelegatedBenefitAdminist	Missing Values in 100% of Records	Long Char Missing Summary
XXXXX	DelegatedBenefitAdministratorO	Missing Values in 100% of Records	Alphanumeric Summary
XXXXX	DenialReason	Missing Values in 75% of Records	Long Char Missing Summary
XXXXX	DrugCode	Missing Values in 100% of Records	Long Char Missing Summary
XXXXX	ECode	Missing Values in 99% of Records	Long Char Missing Summary
XXXXX	FormerClaimNumber	Missing Values in 100% of Records	Long Char Missing Summary
XXXXX	ICD9CMPProcedureCode	Missing Values in 100% of Records	Long Char Missing Summary

Industry Summary Report: 2010 Medical Claims

(Sorted by Data Element)

MA_APCD_Medical_2010_Payers_Summary [Compatibility Mode] - Microsoft Excel			
Home Insert Page Layout Formulas Data Review View Add-Ins			
A374 fx 7791			
A	B	C	D
Payer	Variable	Problem	Worksheet
XXXX1	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX2	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX3	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX4	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX5	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX6	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX7	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX8	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX9	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX10	AdmittingDiagnosis	Invalid Values in less than 1% of Records	Valid Values Summary
XXXX1	BillingProviderNumber	Missing Values in 1% of Records	Long Char Missing Summary
XXXX2	BillingProviderNumber	Missing Values in 1% of Records	Long Char Missing Summary
XXXX3	BillingProviderNumber	Missing Values in 1% of Records	Long Char Missing Summary
XXXX4	BillingProviderNumber	Missing Values in 2% of Records	Long Char Missing Summary
XXXX5	BillingProviderNumber	Missing Values in 2% of Records	Long Char Missing Summary
XXXX6	BillingProviderNumber	Missing Values in 2% of Records	Long Char Missing Summary
XXXX7	BillingProviderNumber	Missing Values in 2% of Records	Long Char Missing Summary
XXXX8	BillingProviderNumber	Missing Values in 7% of Records	Long Char Missing Summary
XXXX9	BillingProviderNumber	Missing Values in 12% of Records	Long Char Missing Summary
XXXX10	BillingProviderNumber	Missing Values in 54% of Records	Long Char Missing Summary

Industry Summary of Claim Data by Payer and Product

Payer	Product ID	Year	Dental		Medical		Pharmacy	
			Claim Lines	Paid Amount	Claim Lines	Paid Amount	Claim Lines	Paid Amount
xxxxxx	yyyyyyyyyyyyy1	2010						
xxxxxx	yyyyyyyyyyyyy2	2010						
xxxxxx	yyyyyyyyyyyyy3	2010						
xxxxxx	yyyyyyyyyyyyy4	2010						
xxxxxx	yyyyyyyyyyyyy5	2010						

Industry Summary of Demographics by Payer and Product

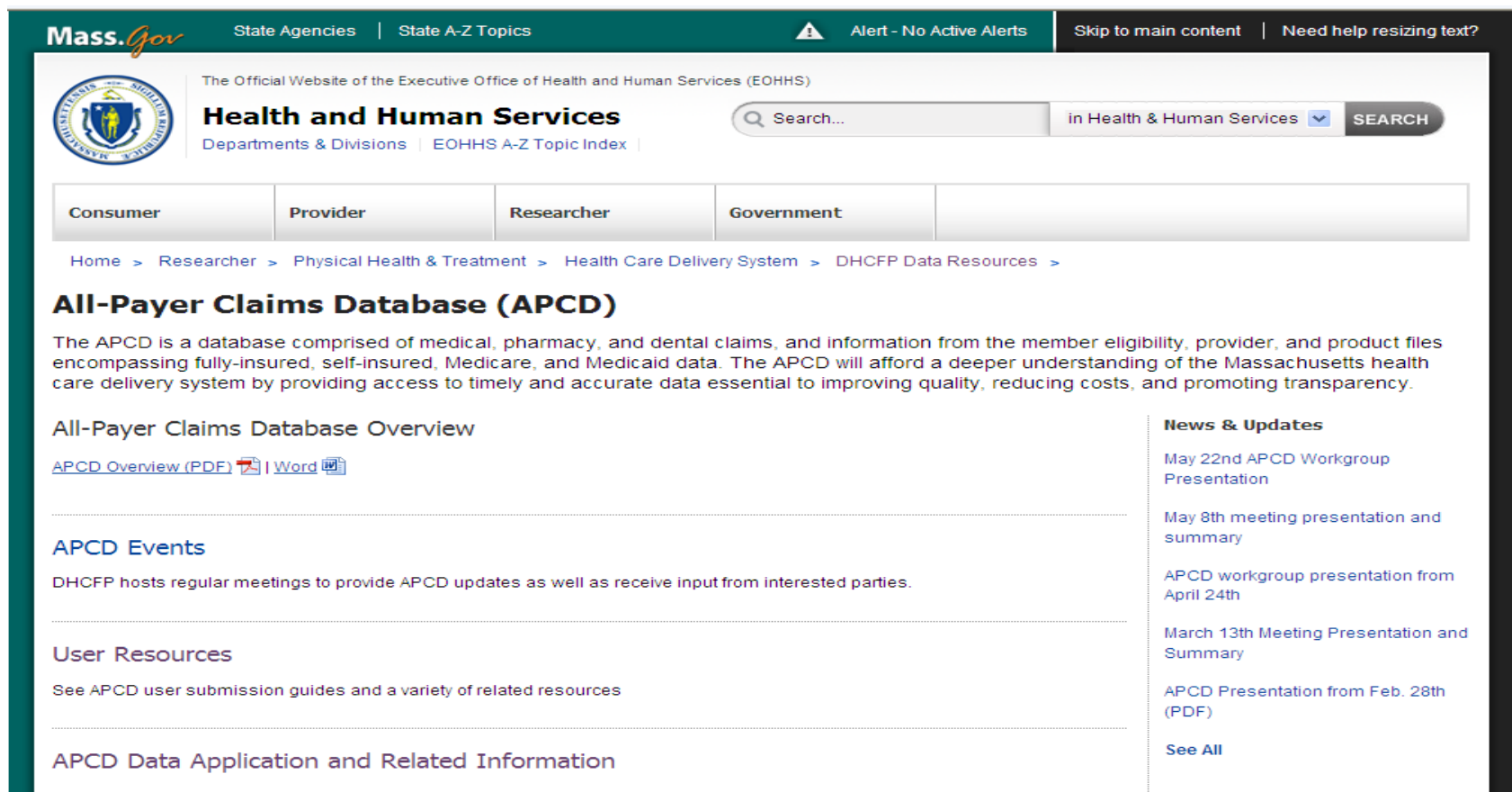
Payer	Product ID	Year	Members Gender		Members Age (years)								
			Female	Male	<1	1-5	6-10	11-17	18-29	30-49	50-64	65-79	80 and older
xxxxxx	yyyyyyyyyyyyy1	2010											
xxxxxx	yyyyyyyyyyyyy2	2010											
xxxxxx	yyyyyyyyyyyyy3	2010											
xxxxxx	yyyyyyyyyyyyy4	2010											
xxxxxx	yyyyyyyyyyyyy5	2010											

QA Profile Reports:

Questions?

APCD Resources for Payers

Updated APCD Website - www.mass.gov/dhcfp/apcd



The screenshot shows the official website of the Executive Office of Health and Human Services (EOHHS) for the All-Payer Claims Database (APCD). The page features a green header with the Mass.gov logo and navigation links for State Agencies, State A-Z Topics, and an alert system. Below the header, the EOHHS logo and name are displayed, along with a search bar and a dropdown menu for 'in Health & Human Services'. A navigation bar includes links for Consumer, Provider, Researcher, and Government. The main content area is titled 'All-Payer Claims Database (APCD)' and provides a detailed overview of the database, which includes medical, pharmacy, and dental claims, as well as member eligibility, provider, and product files. It also lists 'All-Payer Claims Database Overview' with links to PDF and Word documents, 'APCD Events' with information about regular meetings, 'User Resources' with links to submission guides, and 'APCD Data Application and Related Information'. A right-hand sidebar titled 'News & Updates' lists recent presentations and summaries, including the May 22nd APCD Workgroup Presentation, the May 8th meeting presentation and summary, the APCD workgroup presentation from April 24th, the March 13th Meeting Presentation and Summary, and the APCD Presentation from Feb. 28th (PDF). A 'See All' link is provided at the bottom of the sidebar.

Mass.gov State Agencies | State A-Z Topics Alert - No Active Alerts Skip to main content | Need help resizing text?

The Official Website of the Executive Office of Health and Human Services (EOHHS)

Health and Human Services
Departments & Divisions | EOHHS A-Z Topic Index

Search... in Health & Human Services SEARCH

Consumer Provider Researcher Government

Home > Researcher > Physical Health & Treatment > Health Care Delivery System > DHCFP Data Resources >

All-Payer Claims Database (APCD)

The APCD is a database comprised of medical, pharmacy, and dental claims, and information from the member eligibility, provider, and product files encompassing fully-insured, self-insured, Medicare, and Medicaid data. The APCD will afford a deeper understanding of the Massachusetts health care delivery system by providing access to timely and accurate data essential to improving quality, reducing costs, and promoting transparency.

All-Payer Claims Database Overview

[APCD Overview \(PDF\)](#) | [Word](#)

APCD Events

DHCFP hosts regular meetings to provide APCD updates as well as receive input from interested parties.

User Resources

See APCD user submission guides and a variety of related resources

APCD Data Application and Related Information

News & Updates

- May 22nd APCD Workgroup Presentation
- May 8th meeting presentation and summary
- APCD workgroup presentation from April 24th
- March 13th Meeting Presentation and Summary
- APCD Presentation from Feb. 28th (PDF)

[See All](#)

APCD Resources for Payers

Updated USER RESOURCES section -

User Resources - Health and Human Services - Mass.Gov - Windows Internet Explorer






















http://www.mass.gov/eohhs/researcher/physical-health/health-care-delivery/hcf-data-resources/apcd/user-resources.html

Google

Favorites User Resources - Health and Human Services - Mass....

Page Safety Tools

All-Payer Claims Database User Submission Guides

User Submission Guides	Format	Edits
Medical Claims File Submission Guide	PDF  / Word 	Zip File 
Pharmacy Claims File Submission Guide	PDF  / Word 	Zip File 
Dental Claims File Submission Guide	PDF  / Word 	Zip File 
Member Eligibility File Submission Guide	PDF  / Word 	Zip File 
Product File Submission Guide	PDF  / Word 	Zip File 
Provider File Submission Guide	PDF  / Word 	Zip File 
Master List of File Edits (includes edits to Medical Claims, Dental Claims, Pharmacy Claims, Member Eligibility, Product File, and Provider File)	PDF  / Excel 	Zip File 

Internet 200%

For more information:

Upcoming Schedule	
APCD Combined Workgroup 4 th Tuesday of each month	Next meeting on July 24th
APCD Technical Assistance Group (TAG) Webinar 2 nd Tuesday of each month	Next meeting on July 10th

- Send questions and feedback to dhcfp.apcd@state.ma.us
- For more information, including important updates and events, please visit: www.mass.gov/dhcfp/apcd